NTHSSA-WIDE POLICY

Title: NTHSSA Incident Management Policy	Policy Number: 28-01-V1

Applicable Domain: Risk and Compliance Services

Additional Domain(s): NA

Effective Date: 24/07/2019	Next Review Date: 24/07/2022
Issuing Authority: NTHSSA CEO	Date Approved: 24/07/2019

Accreditation Canada Applicable Standard: Leadership Standards (Version 13)

GUIDING PRINCIPLE:

The Northwest Territories Health and Social Services Authority (NTHSSA) embraces a culture where all staff and leadership are committed to providing safe quality care and services to clients, as well as promoting a work environment that is safe for all.

Consistent with our guiding principle of an emphasis on quality care, the NTHSSA is committed to ensuring that all circumstances that may jeopardize quality of care or client, employee and/or visitor safety are promptly reported, reviewed and managed through effective incident management processes that promote learning, and improvement.

PURPOSE/RATIONALE:

The purpose of the NTHSSA Incident Reporting Policy is to ensure a standardized approach for responding, reporting, reviewing and resolving incidents, including but not limited to injuries, falls, medication errors, and procedure or treatment errors that may affect or have affected clients, staff, or visitors.

DEFINITIONS:

The following terms apply to this Policy:

Client refers to clients, patients and / or residents receiving care or accessing services from the NTHSSA.

Electronic Incident Management System means a software application that can capture client safety hazards, and/or incidents that are meant to trigger action, facilitate communication, response, learning, and improvement.

Harm means the impairment of structure or function of the body and/or damaging effect arising there from. Harm includes disease, injury, suffering, disability and death (Conceptual Framework for the International Classification for Patient Safety, 2009).

Incident means any unexpected occurrence/event or circumstance not consistent with the routine operation of the organization or the safe and acceptable standards of client care; an error or situation that could have or has resulted in harm to the client, to staff, or to a member of the public; and/or a loss of cash or damage to an asset such as owned, rented, or leased property or equipment of the NTHSSA and/or third party.

Near Miss means an event or circumstance that was prevented from occurring but had the potential to cause harm.

SCOPE/APPLICABILITY:

The NTHSSA Incident Management Policy applies to all NTHSSA staff, including permanent staff, casual staff, locum staff, interns, and students.

PROCEDURE:

1. When an incident occurs all efforts will be made to ensure the on-going safety and care of the impacted individual(s), and to prevent reoccurrence.

2. All NTHSSA employees who witness or are involved in an incident must report the incident in the Incident Management System (eIMS) within twenty-four hours.

   a. If the witness(es) or person(s) involved in an incident are unable to report in the eIMS, they shall report the incident to the area supervisor/manager for entry into the eIMS within twenty-four hours.

3. Incidents will be reviewed and follow-up on by the appropriate manager or Quality Risk Manager starting the following business day. Follow up will completed and entered into the eIMS within two weeks. Exceptions will be documented.

4. As appropriate, the NTHSSA shall ensure mandatory reporting to external bodies in a manner keeping with applicable privacy policy and legislation. This will include, but not be limited to:
   a. Health Canada;
   b. regulatory bodies, e.g. the Royal College of Physicians and Surgeons of Canada; and
   c. the Department of Health and Social Services with the Government of the Northwest Territories.

5. All incidents and near misses must be classified according to the resulting degree of impact severity. It is necessary to assess the impact based on the level of harm, and required monitoring and interventions. When assessing the level of harm, consider the impairment of the physical, emotional or psychological function. NTHSSA categorizes incidents by severity level as follows:

Severity Level 0 *Near miss/potential to harm*

An incident / error occurred, but the *error* did not reach the client, staff, or visitor

Severity Level 1 *No harm/damage*

An incident / error occurred that reached the client, staff or visitor, but did not cause harm/damage

Severity Level 2 *Temporary harm/minor damage*

An incident / error occurred that caused temporary harm or minor damage of less than $500

Severity Level 3 *Permanent harm/major damage*

An incident / error occurred that caused permanent harm or major damage of $500 or more or 3rd party damage

Severity Level 4 *Death*

An incident or error occurred that caused death

6. All program areas within the NTHSSA will use the eIMS for incident documentation and management.

7. Information collected in the eIMS is an administrative record of incidents that are not part of the client health and social services record and is treated as confidential. Printing or copying incident reports is prohibited by unauthorized individuals.

8. All NTHSSA personnel are required to complete all applicable training sessions on the use of the eIMS, review all related Incident Management policies and procedures, and ensure system passwords are secured and not shared.

PERFORMANCE MEASURES:
Not Applicable

CROSS-REFERENCES:
- Incident Management Standard Operating Procedure
- Incident Monitoring Standard Operating Procedure
- Incident Reporting Downtime Standard Operating Procedure
- Incident Reporting Roles and Responsibilities Standard Operating Procedure

ATTACHMENTS:
Not Applicable

REFERENCES:

World Health Organization, Conceptual Framework for the International Classification for Patient Safety. Version 1.1. (2009) Final Technical Report. Retrieved from https://www.who.int/patientsafety/taxonomy/icps_full_report.pdf.

APPROVAL:

July 24, 2019
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Date

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Sue Cullen
NTHSSA Chief Executive Officer